



62 AF
2188

P A T E N T

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of)	
)	
Paul S. Neuman)	Examiner P. Vital
)	
Serial No. 09/650,800)	Group Art Unit 2188
)	
Filing Date: 08/30/00)	
)	Docket No. 33012/289/101
)	
For: METHOD FOR IMPROVED)	<u>AMENDMENT AFTER FINAL</u>
FIRST LEVEL CACHE)	<u>UNDER 37 C.F.R. 1.116</u>
COHERENCY)	

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED
AUG 24 2004
Technology Center 2100

Dear Sir:

CERTIFICATE UNDER 37 C.F.R. 1.8: I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Box AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA, 22313-1450 on this

16th day of August, 2004

By Carolyn I. Erickson



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re Application of:

Paul S. Neuman

Serial No.: 09/650,800

Examiner: P. Vital

Filing Date: August 30, 2000

Group Art Unit: 2188

For: METHOD FOR IMPROVED FIRST LEVEL CACHE COHERENCY

Docket No.: 33012/289/101

RECEIVED

AUG 24 2004

Technology Center 2100

TRANSMITTAL SHEET

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

CERTIFICATE UNDER 37 C.F.R. 1.8: I hereby certify that this correspondence and the documents described herein are being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 16th day of August, 2004.

By Carolyn L. Erickson

We are transmitting herewith the attached:

☒ Amendment After Final Under 37 CFR § 1.116

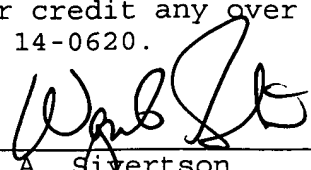
☒ No additional fee required

☐ The fee has been calculated as shown:

CLAIMS AS AMENDED							
	(3)	(4)	(5)	SMALL ENTITY		OTHER	
	REMAINING CLAIMS	HIGHEST PAID	EXTRA	RATE	ADD'L FEE	RATE	ADD'L FEE
TOTAL CLAIMS	-	=		x9=	\$	x18=	\$
INDEPENDENT CLAIMS	-	=		x43=	\$	x86=	\$
() FIRST MULTIPLE DEPENDENT CLAIM				+145=	\$	+290	\$
TOTAL				\$		\$	

- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established.
- ☐ Other: _____.
- ☒ Please charge any deficiencies or credit any over payment in the enclosed fees to Deposit Account 14-0620.

By: _____


Wayne A. Sivertson

Reg. No. 25,645

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